## **Statement of Organization - Candidate Committee**

Is	this statement:			
D	New		Amended	

Use this form to create a new or update an existing candidate committee.

This form must be accommanied by form CRO-3500. An amended form is required for each new election year.

This form must be accompanied by form CKO-5300. An amended form is required for each new election year.					
1. Committee Information a. Name of Committee d. ID Number					
Committee to Elect Rick Merc b. Mailing Address (include City, State and Zip Code)	1EV DH 1ZP				
b. Walling Address (include City, State and Zip Code)	1 1/3/2020				
193 Firewood Place, Clayton, NC 2752					
c. Committee Website (Optional)	f. Phone Number				
	919.397.4140				
2. Candidate Information a. Full Name e. Party Affiliation					
	e. Party Affiliation				
Richard Keith Mercier	Democrat				
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought				
193 Firewood Place Clayton, NC 27527 c. Phone Number d. Email Address	Board of Education				
c . Phone Number d. Email Address	g. Next Election Year h. Jurisdiction				
99.397.4140 rickmercier 190 gmail. W	m 2020 Johnston County				
3. Treasurer Information	4. Assistant Treasurer Information				
a. Full Name	a. Full Name				
Richard Keith Mercier  b. Mailing Address (include City, State, and Zip Code)					
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State and Zip Code)				
193 Firewood Place, Clayton, NC 27527					
c. Phone Number d. Email Address	c. Phone Number d. Email Address				
919.397.4140 rickmerced9@gmail.com	1				
Send report notices by email Yes No	☐ Email copy of report notices				
5. Custodian of Books Information (Keeper of Records a. Full Name	s) 6. Account Information (incl. CRO-3500)  a. Financial Institution Full Name				
	BB+T				
Richard Kith Mercier  b. Mailing Address (include City, State, and Zip Code)	19041				
1913 Fire weed Place, Clayton, NC 27527	301 Vandora Springs Road GATNET, NC 27529 b. Account Code c. Type				
c. Phone Number d. Email Address	b. Account Code c. Type				
MIN 397. 4140 rickmercier 19(a) gwail. (0)	Community Checking				
I certify that the Committee is in compliance with all applicable provisions of Article 22A of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.    Richard Mercle   12/30/19     Printed Name of Treasurer   Signature of Appointed Treasurer   Date					
Kichard Mercier	Signature of Candidate  Date				